

Name
in
Full

Mrs Bond

CERTIFICATE OF DEATH

TO BE ANSWERED BY
NEAREST FRIEND

Died at <u>Lorraine</u>		Town	County <u>Struys</u>		MARYLAND	
Date of death <u>1908 Oct</u>	Month <u>Oct</u>	Day <u>25</u>	Age <u>77</u>	Years	Months	Days
Sex <u>Female</u>	Color or Race <u>white</u>			Birth-place <u>Hanover Co</u>		
Occupation <u>Housewife</u>	Where Residing if not at place of death					<u>Struys Co</u>
Married, Single or Widowed <u>Widowed</u>	Name of Wife or Husband <u>Mr Bond</u>					
Father's Name <u>Don't Know</u>			Father's Birthplace <u>Struys Co</u>			
Mother's Maiden Name <u>Don't Know</u>			Mother's Birthplace <u>Struys Co</u>			
Name of person giving information <u>W G Rude</u>			How related to deceased <u>Son</u>			

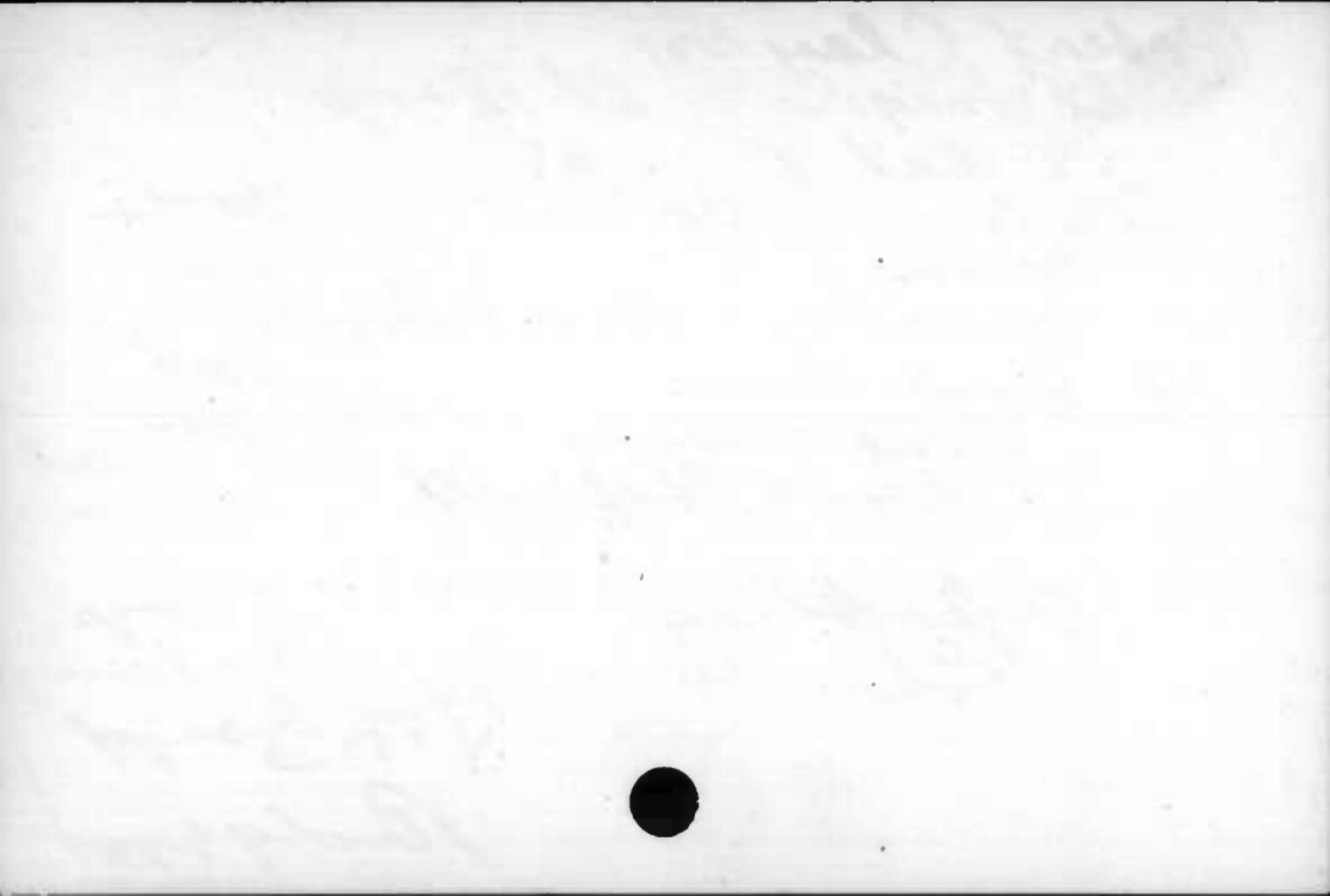
CAUSES OF DEATH

(64)

Primary <u>Cerebral Hemorrhage</u>	How long <u>8 months</u>
Immediate <u>Swelling of Brain</u>	How long <u>2 "</u>
Are the name, age, sex, color, date and place correctly given above? <u>Yes</u>	Signature of Physician <u>John Lynch</u>
	Address <u></u>

PHYSICIAN
OR CORONER

Accident or Suicide?



Name
in
Full

Robert Clayton +
8x Dugors St Marys

CERTIFICATE OF DEATH

TO BE ANSWERED BY

NEAREST FRIEND

Died at

Town:

St Marys

MARYLAND

Date
of death

Month

Day

Years

Months

Days

1908 Oct 1

Age 68

Sex

Color or
Race

Colored

Birth-
place

Md

Occupation

Former

Where Residing if not
at place of deathMarried, Single
or WidowedMonice Name of Wife or
Husband

Mary Clayton

Father's
Name

Don't Know

Father's
Birthplace

Md

Mother's
Maiden Name

Don't Know

Mother's
Birthplace

Md

Name of person giving
Information

Sarah Hopewell

How related
to deceased

64

PHYSICIAN
OR CORONER

CAUSES OF DEATH

Primary

Apoplgy

3 days

Immediate

Edwards

24 hours

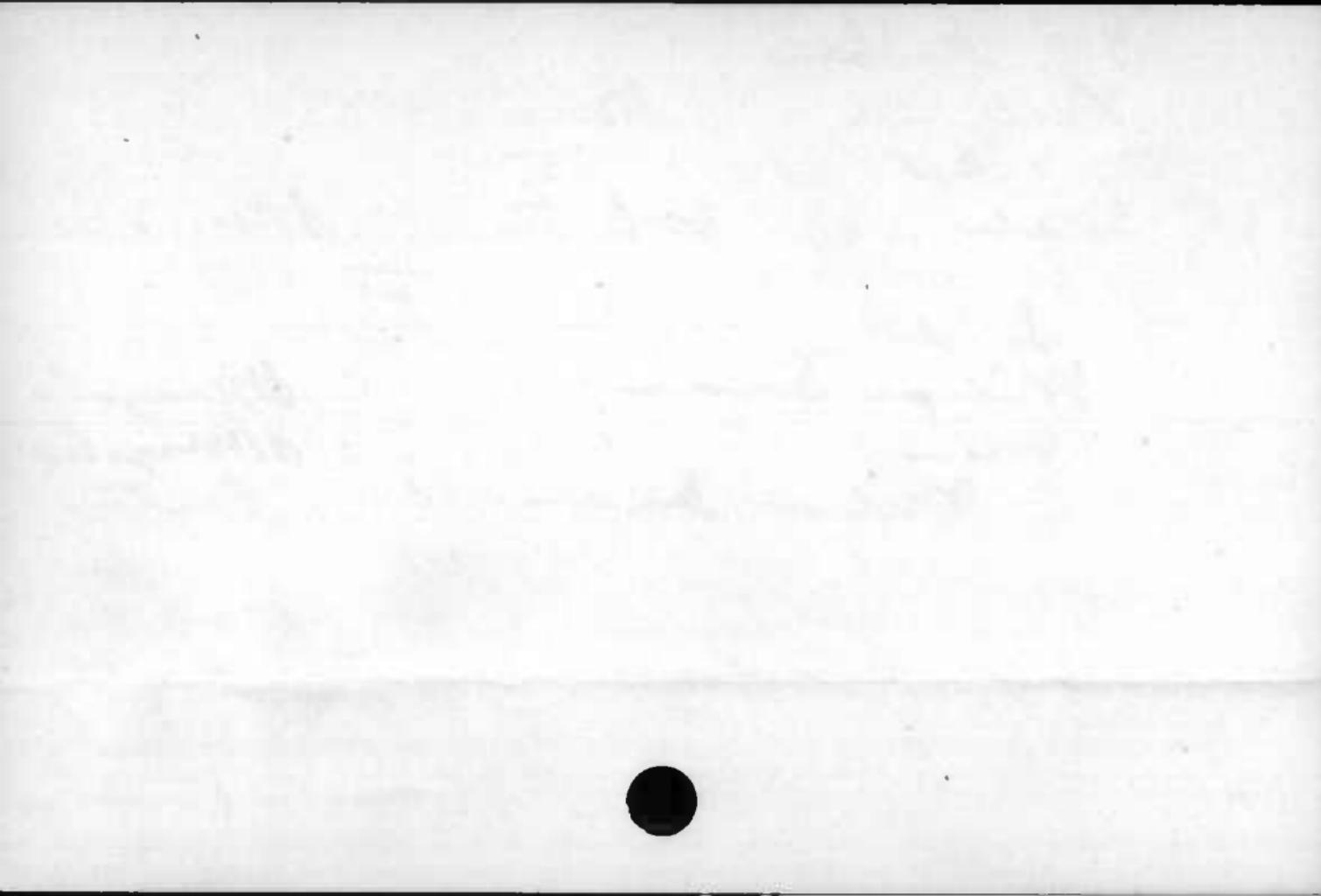
Are the name, age, sex, color, date
and place correctly given above?Signature of
Physician

Address

R. H. Engd

Ridgeview

Accident or Suicide?



Name
in
Full

J M Dean

+

CERTIFICATE OF DEATH

TO BE ANSWERED BY
NEAREST FRIEND

Town	County			MARYLAND	
Died at Hollywood	Month	Day	Years	Months	Days
Date of death 1908 Oct	14	Age 5-			
Sex Male	Color or Race	White	Birth-place	Stevens	
Occupation	Where Residing if not at place of death				
Married, Single or Widowed Single	Name of Wife or Husband				
Father's Name Wilson Dean	Father's Birthplace Chicago				
Mother's Maiden Name Mrs	Mother's Birthplace Stevens				
Name of person giving information Wilson Dean	How related to deceased Father				

CAUSES OF DEATH

4

How long

5 weeks

How long

PHYSICIAN
OR CORONER

Primary Cancer

Immediate Intestinal Hemorrhage

- Are the name, age, sex, color, date and place correctly given above?

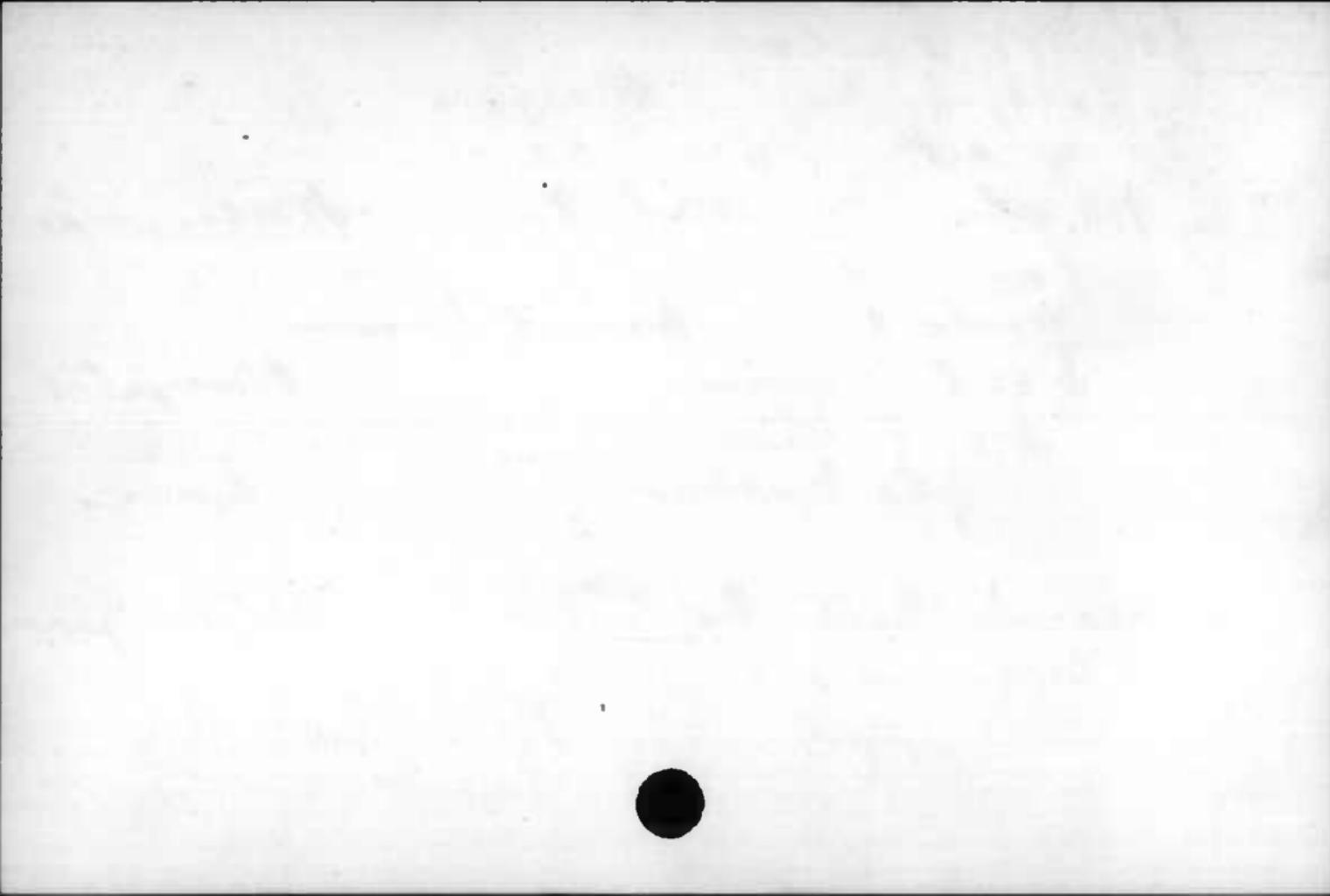
yes

Signature of Physician

Address

John Squire
Georgetown

Accident or Suicide?



Name
In
Full

Unknown, believed to be Bob Duster,
a cook on sloop "Alice P. Smith",
Point No Point, St. Mary's County, Maryland

CERTIFICATE OF DEATH
MARYLAND

TO BE ANSWERED BY
NEAREST FRIEND

Died at	Point No Point	County	St. Mary's						
Date of death	1908	Month	Oct	Day	31	Age	Years	Months	Days
Sex	Male	Color or Race	white	Birth-place					
Occupation	Oysterman	Where Residing if not at place of death	Baltimore Ind						
Married, Single or Widowed	Name of Wife or Husband								
Father's Name	Father's Birthplace								
Mother's Maiden Name	Mother's Birthplace								
Name of person giving information	How related to deceased								

CAUSES OF DEATH

172

PHYSICIAN
OR CORONER

Primary

Immediate

Drowned

How long

Are the name, age, sex, color, date and place correctly given above?

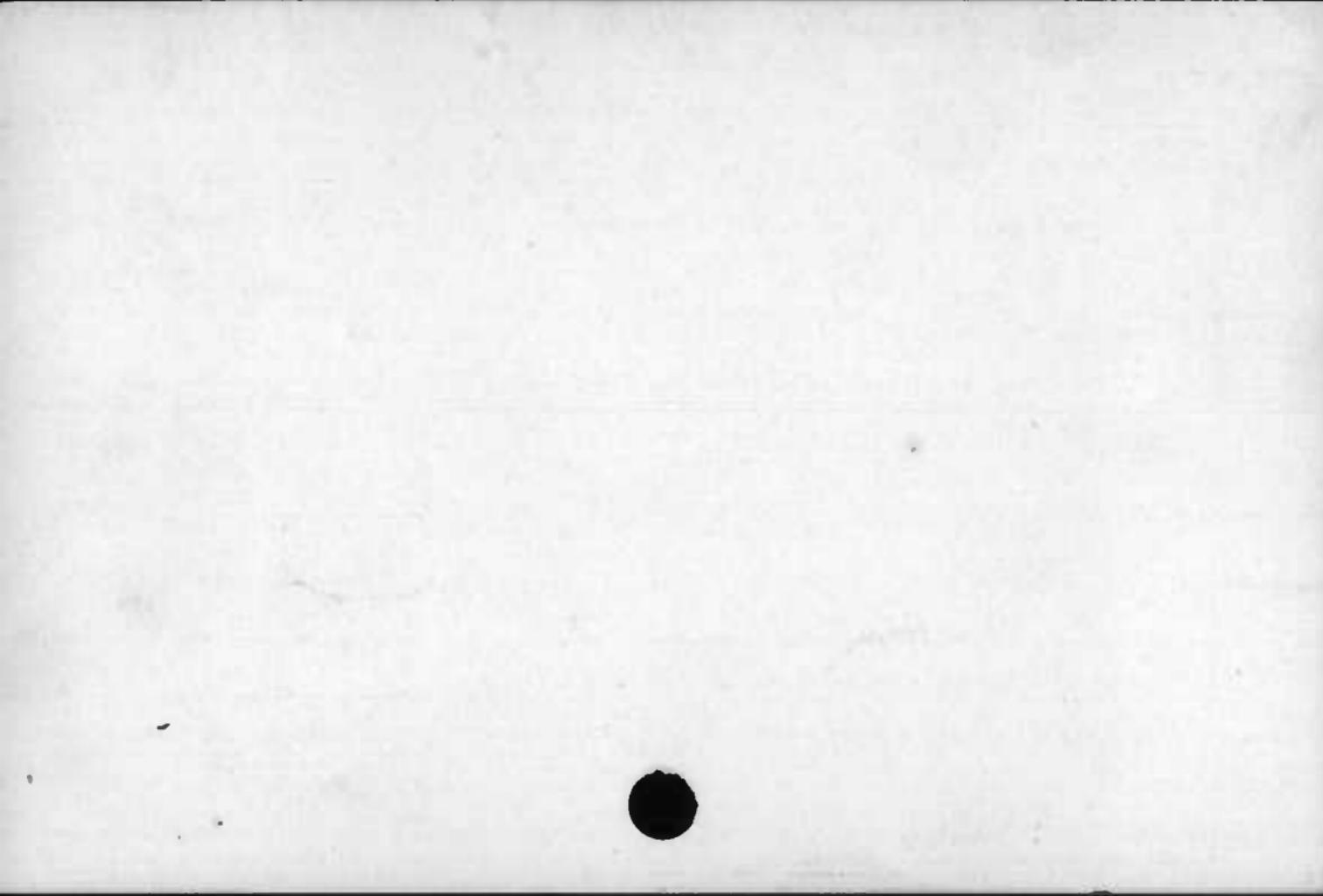
Signature of

Address

Lorraine D. Ahlstrom
acting Coroner
Hawkinsville Md.

Accident or Suicide?

Accident



Name
in
Full

John W Galtan

CERTIFICATE OF DEATH

To BE ANSWERED BY

NEAREST FRIEND

Town	County			MARYLAND		
Died at Hollywood	Anne Arundel					
Date of death 1908	Month at	Day	Age	Years	Months	Days
Sex male	Color or Race	white			Birth-place	Hagerstown
Occupation Farmer	Where Residing if not at place of death					
Married, Single or Widowed wedlock	Name of Wife or Husband	Do not know			Father's Birthplace	Hagerstown
Father's Name don't know				Mother's Birthplace	Hagerstown	
Mother's Maiden Name don't know				How related to deceased	Son	
Name of person giving information J.W. Galtan				How long	About a year	

CAUSES OF DEATH

(104)

PHYSICIAN
OR CORONER

Primary Chronic Gastric Enteritis

How long

Immediate Exacerbation

How long

Are the name, age, sex, color, date and place correctly given above?

Yes

Signature of Physician

Address

Dr. Louis Leonardson

Accident or Suicide?



Name
in
Full

Charles J. S. Gordon

CERTIFICATE OF DEATH

To BE ANSWERED BY

NEAREST FRIEND

Died at	Town	County	MARYLAND	
Date of death	Month	Year	Months	Days
Sex	Color or Race	Birth-place		
Occupation	Where Residing if not at place of death	Pearson Maryland		
Married, Single or Widowed	Name of Wife or Husband	Clara Goldson	Father's Birthplace	Maryland
Father's Name	Charles J. Gordon	Mother's Birthplace	Maryland	
Mother's Maiden Name	Bonnie M. Worsey	How related to deceased	Not Related	
Name of person giving information	Joseph Wellington Prisope			

CAUSES OF DEATH

176

Primary From cut received in abdomen
causing both of his bowels to come out
How long From time of
immediate injury to time of
death was about 28 hours

PHYSICIAN
OR CORONER

Are the name, age, sex, color, date and place correctly given above?

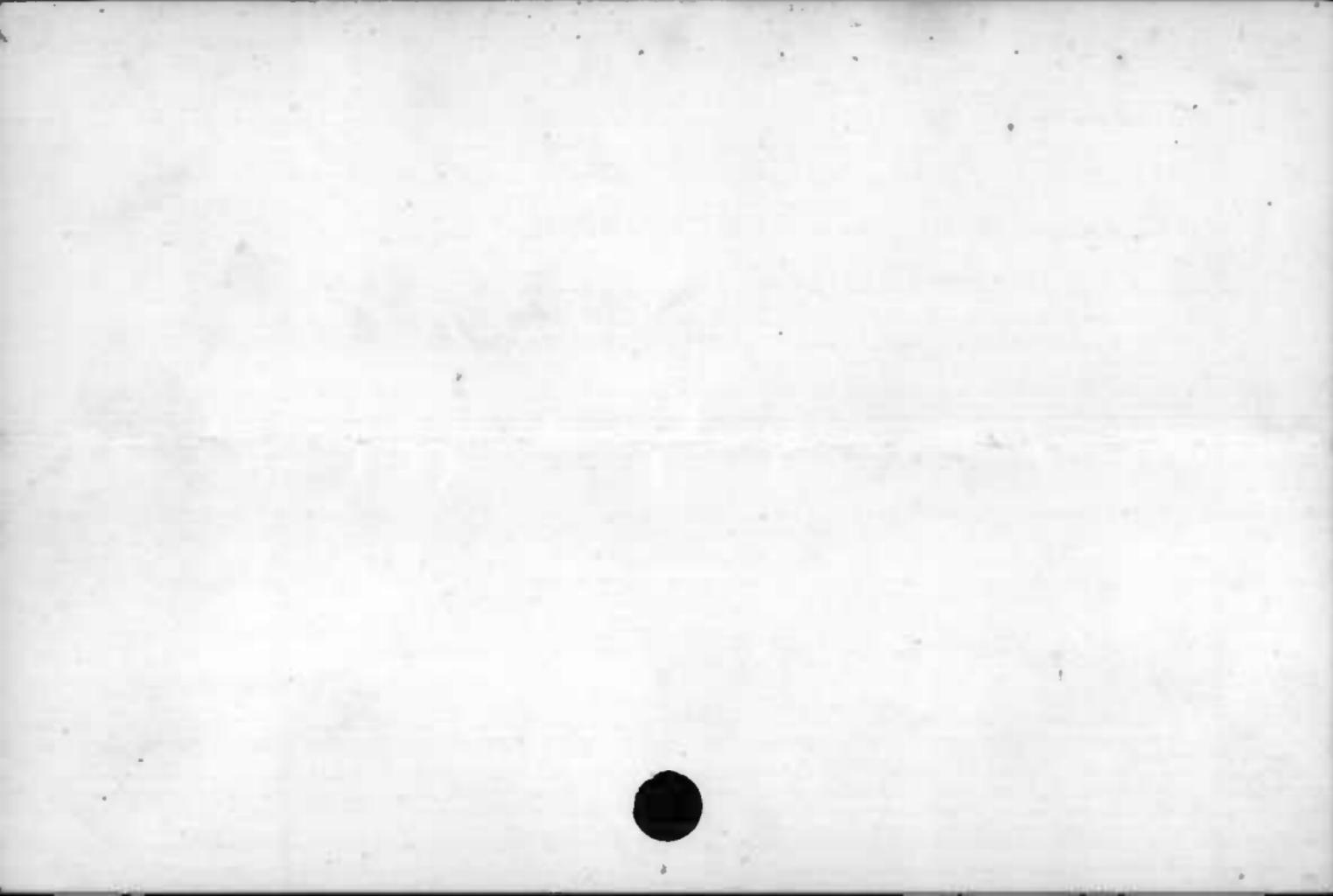
Yes

Signature of Physician

A. L. Hadgdon M.D.
Pearson Post Office
Maryland

Accident or Suicide?

Homicidal



Name
in
Full

TO BE ANSWERED BY
NEAREST FRIEND

PHYSICIAN
OR CORONER

Amelia Saunders

CERTIFICATE OF DEATH

Died at Great Mills		Town	St. Mary's	County	MARYLAND
Date of death 1908	Month Oct-	Day 30	Age 88	Years	Months —
Sex Female	Color or Race White	Birth-place Baltimore.			
Occupation Housewife	Where Residing if not at place of death St. Mary's Co.				
Married, Single or Widowed	Name of Wife or Husband James W. Saunders				
Father's Name Van Conkling					Father's Birthplace Baltimore
Mother's Maiden Name Mary Kelle					Mother's Birthplace Baltimore
Name of person giving information Sam					How related to deceased Son

CAUSES OF DEATH

154

Hour

Twelve months.

How long

Primary

Degenerities of age

Immediate

Are the name, age, sex, color, date and place correctly given above?

Yes

Signature of Physician

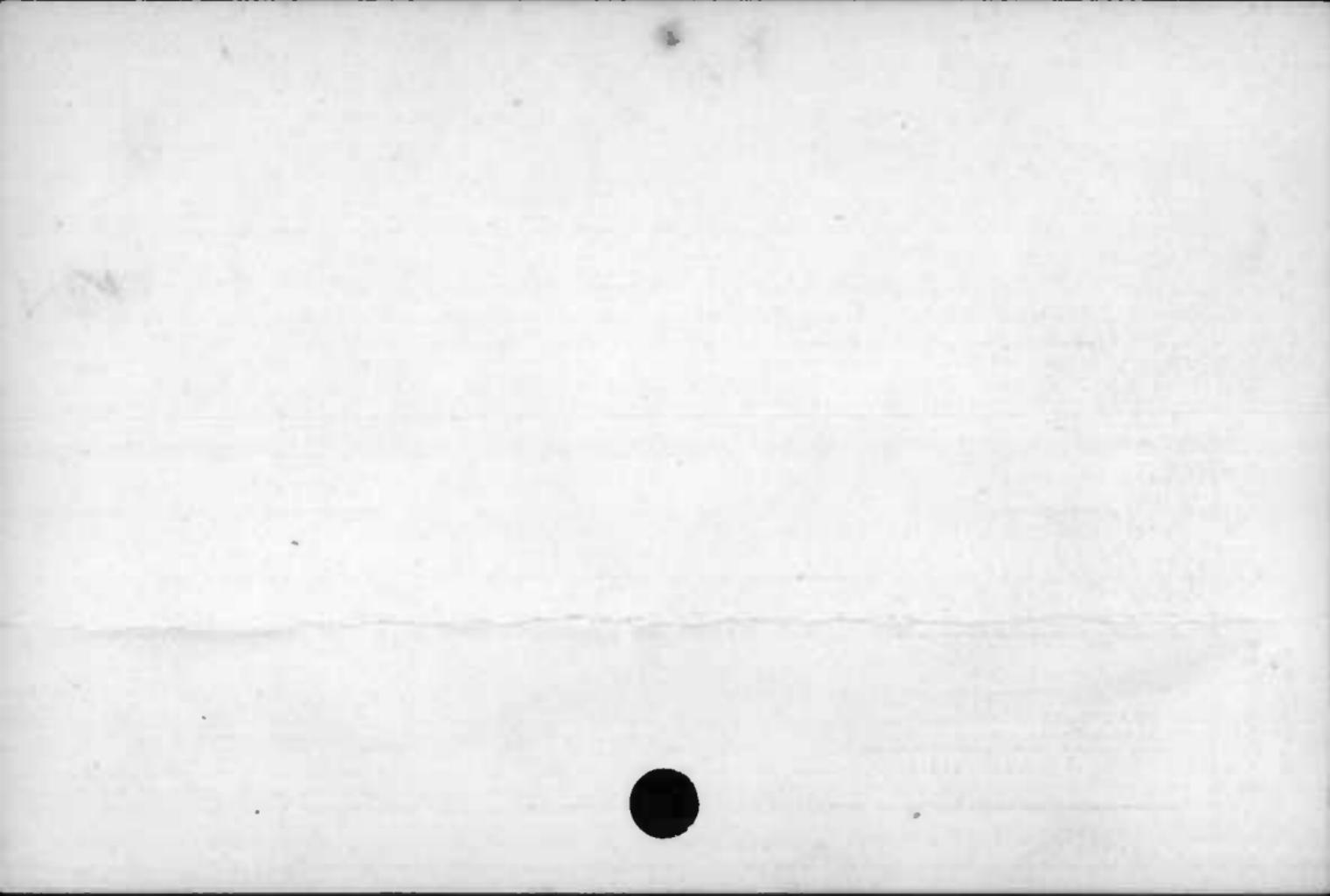
Henry Richardson M.D.

Address

Great Mills

St. Mary's Co., Md.

Accident or Suicide?



Name
in
Full

George W. Thomas

CERTIFICATE OF DEATH

To BE ANSWERED BY
NEAREST FRIEND

Died at	Town	County	MARYLAND		
Date of death	Month	Day	Years	Munths	Days
Sex	Color or Race	Age			
Occupation	Where Residing if not at place of death				
Married, Single or Widowed	Married	Name of Wife or Husband			
Father's Name	Father's Birthplace				
Mother's Maiden Name	Mother's Birthplace				
Name of person giving Information	How related to deceased				

1908 Oct. 4 60 St. Mary's County St. Mary's Count

Male White

Butcher

Married Mary Paller

Richard Thomas Virginia

Not known Virginia

James E. Brown Not Related

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary	Paralysis	
Immediate	Central Coma	
Are the name, age, sex, color, date and place correctly given above?	Yes	Signature of Physician
		Address
Accident or Suicide?	()	

66 3 Years

14 hrs

P. Harper Lynch, M.D.

Valley Lee, Ind.

